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|--|---|--|---|---|---------------------------|--------------------------------|
| SERIAL NUMBER 10/676,349 | FILING or 371(c) DATE 09/30/2003 RULE | CLASS 422 | GROUP ART UNIT 1797 021 | ATTORNEY DOCKET NO. 1594-004000US(2083-045) | | |
| APPLICANTS Michael L. Bell, Fullerton, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/19/2003 | | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/JYOTI NAGPAUL/</u> Examiner's Signature | | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY CA | SHEETS DRAWINGS 7 | TOTAL CLAIMS 23 | INDEPENDENT CLAIMS 2 |
| ADDRESS Townsend and Townsend and Crew LLP Two Embarcadero Center, 8th Floor San Francisco, CA 94111 UNITED STATES | | | | | | |
| TITLE Clinical analysis system | | | | | | |
| FILING FEE RECEIVED 804 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | | |